

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10718131 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2		1				
3	2					
4	1					
5	4					
6	1					
7	2					
8	1					
9	1					
10	1					
11	1					
12	2					
13	1					
14	2					
15	1					
16	2					
17	1					
18	1					
19	1					
20	1					
21	2					
22	1					
23	2					
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25	2					
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47						
48						
49						
50						

TOTAL IND.

4

TOTAL DEP.

35

TOTAL CLAIMS

39

TOTAL IND.

TOTAL DEP.

TOTAL CLAIMS